

PART B - FEE(S) TRANSMITTAL

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324 7590 03/08/2006
CIBA SPECIALTY CHEMICALS CORPORATION
PATENT DEPARTMENT
540 WHITE PLAINS RD
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TARRYTOWN, NY 10591-9005

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| | |
|----------------------|--------------------|
| Lynn Girolamo | (Depositor's name) |
| <i>Lynn Girolamo</i> | (Signature) |
| 6/5/06 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|--------------------------|---------------------|------------------|
| 09/306,006 | 05/06/1999 | ANDREAS WERNER SUPERSAXO | NB/2-21551/A | 2914 |

TITLE OF INVENTION: USE OF NANODISPERSIONS IN PHARMACEUTICAL END FORMULATIONS

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|---------------------|--------------|--|--|-------------------------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 06/08/2006 |
| EXAMINER | ART UNIT | 06/08/2006 MBIZUNE2 00000081 031935 09306006 | | | 06/08/2006 |
| SHARAREH, SHAHNAH J | 1617 | 424-450000 | 01 FC:1501 02 FC:1504 03 FC:8001 | 1400.00 DA 300.00 DA 12.00 DA | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page:
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 KEVIN T. Mansfield
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

1. Ciba Specialty Chemicals Corporation Tarrytown, N.Y. USA
2. Vesifact AG Baar, Switzerland

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-1935 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Tyler A. Stevenson

Date 6/5/06

Typed or printed name Tyler A. Stevenson

Registration No. 46,388

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